

POLICY MANUAL

Subject: Disclosure Files

Effective Date: 1/1/96

Initiated By: Cinde Stewart Freeman
Chief Quality Officer

Approved By: Billie Alexander Avery
Chief Clinical Officer

Review Dates: 1/99 CSF 2/09 DNF 05/09 BLA
01/10 Committee, 10/12 Committee
2/14 Committee

Revision Dates: 1/03 CSF 11/08 LH
5/09 DNF, 04/12 CRB

POLICY:

In accordance with state regulations, copies of the following are maintained on file for 36 months after their issuance and are available for inspection upon request: local fire safety inspections, local building code inspections, fire marshal reports, Department of Mental Health (TNDMH) licensure and fire safety inspections and surveys, Tennessee State Treasury Comptroller audit report and findings. Patients or guarantors are informed of the availability of these files and their right to inspect these files during normal business hours prior to any financial agreement with the organization.

PROCEDURE:

1. The QM Director or OP Manager ensures that each site has the above named reports and any updates.
2. These files are maintained in the Quality Management office and/or the Safety Director's office at the residential site, by the Director/Manager at the Hermitage IOP site and by the counseling staff at the outpatient satellite sites.
3. Staff admitting patients are responsible for informing the patient and/or guarantor of the files and facilitating inspection of these files as desired.